

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093304

Entity Name: TRI-CHOICE SERVICES, INC.

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

1155 OCOEE - APOPKA
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

1155 OCOEE-APOPKA RD
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3541105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHELTON, JON
1115 OCOEE-APOPKA ROAD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

SHELTON, JON
1115 OCOEE-APOPKA ROAD
APOPKA, FL 32703 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHELTON, JON
Address: 1155 OCOEE-APOPKA ROAD
City-St-Zip: APOPKA, FL 32703

Title: VP () Delete
Name: JOHNSON, MATTHEW
Address: 200 MAITLAND AVENUE #98
City-St-Zip: MAITLAND, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JON SHELTON

P

04/12/2007

Electronic Signature of Signing Officer or Director

Date